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CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

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CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

COMPLAINT BY A PRISONER UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §§ 1983

Name PHILLIPS RONALD  
(Last) (First) (Initial)

Prisoner Number F 82056

Institutional Address SAN QUENTIN STATE PRISON  
SAN QUENTIN, CA 94974

(PR)

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

SBA

RONALD PHILLIPS  
(Enter the full name of plaintiff in this action.)

C 07 5138

vs.

Case No. \_\_\_\_\_  
(To be provided by the clerk of court)

SAN QUENTIN STATE PRISON (NORTHERN)  
(Enter the full name of the defendant(s) in this action))

COMPLAINT UNDER THE  
CIVIL RIGHTS ACT,  
42 U.S.C §§ 1983

[All questions on this complaint form must be answered in order for your action to proceed.]

1. Exhaustion of Administrative Remedies

[Note: You must exhaust your administrative remedies before your claim can go forward. The court will dismiss any unexhausted claims.]

A. Place of present confinement SAN QUENTIN PRISON

B. Is there a grievance procedure in this institution?

YES ☒ NO ( )

C. Did you present the facts in your complaint for review through the grievance procedure?

YES ( ) NO ☒

D. If your answer is YES, list the appeal number and the date and result of the

COMPLAINT

1 appeal at each level of review. If you did not pursue a certain level of appeal,  
2 explain why.

3 1. Informal appeal BECAUSE THEY ARE THE CAUSE  
4 FOR MY SEIZURE, BY NOT GIVING ME MY  
5 MEDICATION, WHEN THEY KNEW 2. First  
6 formal level \_\_\_\_\_

7 \_\_\_\_\_  
8 \_\_\_\_\_  
9 3. Second formal level \_\_\_\_\_  
10 \_\_\_\_\_  
11 \_\_\_\_\_ 4 Third  
12 formal level \_\_\_\_\_  
13 \_\_\_\_\_  
14 \_\_\_\_\_

15 E. Is the last level to which you appealed the highest level of appeal available to  
16 you?

17 YES ( ) NO ( )

18 F. If you did not present your claim for review through the grievance procedure,  
19 explain why. EXPLAINED IN #1  
20 \_\_\_\_\_  
21 \_\_\_\_\_

22 II. Parties

23 A. Write your name and your present address. Do the same for additional plaintiffs,  
24 if any.

25 RONALD PHILLIPS SAN QUENTIN CA 94974  
26 \_\_\_\_\_  
27 \_\_\_\_\_

28 B. Write the full name of each defendant, his or her official position, and his or her

place of employment.

NONE

III.

### Statement of Claim

State here as briefly as possible the facts of your case. Be sure to describe how each defendant is involved and to include dates, when possible. Do not give any legal arguments or cite any cases or statutes. If you have more than one claim, each claim should be set forth in a separate numbered paragraph.

WHEN I CAME TO SQ, I HAD INFORMED THEM THAT I HAVE SEIZURES, PLUS IT IS IN THEIR MEDICAL FILE, SINCE I HAVE ONE HERE, BEFORE, ANYWAY THEY WAITED TWO DAYS BEFORE GIVING IT TO ME, I HAD A SEIZURE IN MY CELL ON THE 2ND FLOOR THEY CAME IN GOT ME, THEY HELD ME AND THEN SENT ME BACK TO MY CELL EVEN THOUGH MY BLOOD PRESSURE WAS HIGH, AND CHOLESTERAL WAS HIGH WHEN I GOT BACK TO THE CELL I HAD 2 MORE ATTACKS, BAD ENOUGH TO TAKE ME TO AN OUTSIDE HOSPITAL IN PINOLE, AND TO STAY FOR A COUPLE OF DAYS.

DATE OF SEIZURE 8-6-07  
SQ ARRIVAL 8-3-07

### IV. Relief

Your complaint cannot go forward unless you request specific relief. State briefly exactly what you want the court to do for you. Make no legal arguments; cite no cases or statutes.

SO, I'M APPLYING FOR A LAW SUIT. →

INJURY  
1. SHORT TERM MEMORY LOSS  
2. SLURRING OF SPEECH

1 BECAUSE OF THEIR NEGLIGENCE, THEIR  
2 FOR CAUSING ME TO HAVE NOT ONE BUT  
3 SEIZURES, AND NOT TAKING THE STEPS  
4 TO PREVENT SUCH THINGS HAPPING. SO THEIR  
5 FOR AM ASKING FOR \$2.5 MILLION DOLLARS  
6 IN DAMAGES, SINCE THEY ARE SUPPOSE TO

7 I declare under penalty of perjury that the foregoing is true and correct. WATCH OUT

8  
9 Signed this SEPT day of 21<sup>TH</sup>, 2007

FOR ME AND  
DIDNT

10  
11 Ronald Phillips

12 (Plaintiff's signature)

RONALD PHILLIPS F-82056  
SAN QUENTIN PRISON  
SAN QUENTIN, CA  
94974

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COURT FOR THE NORTHERN DISTRICT OF  
CALIFORNIA

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